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PART B - ISSUE FEE TRANSMITTAL

\$565.00 - 842
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1. CORRESPONDENCE ADDRESS

21 MAR 5 1992
MAIL ROOM
PAT. & TRADEMARK OFF.

JEROME H. LEMELSON
PO BOX 14-286
INCLINE VILLAGE, NV 89450

921101
1101

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME JEROME LEMELSON

Street Address PO BOX 5076

City, State and ZIP Code INCLINE VILLAGE, NV. 89450

CO-INVENTOR'S NAME _____

Street Address _____

City, State and ZIP Code _____

☐ Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
07/696,747	05/07/91	020	ROSENBERG, P	

First Named Applicant LEMELSON, JEROME H.

TITLE OF INVENTION REACTION APPARATUS AND METHOD

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
1	075-010,120	009	UTILITY	YES	\$565.00	03/20/92

Further correspondence to be mailed to the following:

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

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5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE:

(2) ADDRESS: (City & State or Country)

(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION

☐ This application is NOT assigned.
☐ Assignment previously submitted to the Patent and Trademark Office.
☐ Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

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The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Signature of party in interest (if record)) Jerome Lemelson (Date) 3/29/92

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SN- 07/696,747

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on February 29, 1992
(Date)

Jerome Lemelson
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